

Outlier Thresholds and Payment Percentage

| Year | Hospital Multiple Threshold | Community Mental Health Center (CMHC) Multiple Threshold*** | Fixed Dollar Threshold | Payment Percentage |
|---|-----------------------------|---|------------------------|--------------------|
| August 1, 2000 through December 31, 2000* | 2.5 | N/A | \$0 | 75 percent |
| 2001* | 2.5 | N/A | \$0 | 75 percent |
| 2002** | 3.0 | N/A | \$0 | 50 percent |
| 2003 | 2.75 | N/A | \$0 | 45 percent |
| 2004 | 2.6 | 3.65 | \$0 | 50 percent |
| 2005 | 1.75 | 3.5 | \$1175 | 50 percent |
| 2006 | 1.75 | 3.4 | \$1250 | 50 percent |
| 2007 | 1.75 | 3.4 | \$1825 | 50 percent |
| 2008 | 1.75 | 3.4 | \$1575 | 50 percent |
| 2009 | 1.75 | 3.4 | \$1800 | 50 percent |
| 2010 | 1.75 | 3.4 | \$2175 | 50 percent |
| 2011 | 1.75 | 3.4 | \$2025 | 50 percent |
| 2012 | 1.75 | 3.4 | \$2025 | 50 percent |
| 2013 | 1.75 | 3.4 | \$2025 | 50 percent |
| 2014 | 1.75 | 3.4 | \$2900 | 50 percent |
| 2015 | 1.75 | 3.4 | \$2775 | 50 percent |

* Years in which the outlier payment was made per claim rather than per separately paid service.

** Payment made per claim until April 1, 2002, at which point outlier payments were made on a service basis.

*** CMS determines CMHC eligibility for outlier payments using only a multiple threshold. CMS used the hospital multiple threshold for CMHCs until 2004, when a specific CMHC multiple threshold was established. Beginning in CY 2010, CMS determined CMHC eligibility for outlier payments for either level of Partial Hospitalization using the payment rate for the higher level APC applicable to CMHCs.

**OPPS Rural Sole Community Hospital and Essential Access Community Hospital
Adjustment ***

| Year | Rural Adjustment Payment Percentage |
|-----------|-------------------------------------|
| 2000-2005 | N/A |
| 2006 | 7.1 percent |
| 2007 | 7.1 percent |
| 2008 | 7.1 percent |
| 2009 | 7.1 percent |
| 2010 | 7.1 percent |
| 2011 | 7.1 percent |
| 2012 | 7.1 percent |
| 2013 | 7.1 percent |
| 2014 | 7.1 percent |
| 2015 | 7.1 percent |

* The rural SCH and EACH payment adjustment excludes drugs, biologicals, items and services paid at charges reduced to cost, and services paid under the pass-through payment policy in accordance with section 1833(t)(13)(B) of the Act, as added by section 411 of Pub. L. 108-173.